



**BUILDING PERMIT APPLICATION**  
**BUILDING DIVISION/COMMUNITY DEVELOPMENT DEPARTMENT**

**BS** \_\_\_\_\_

***SINGLE FAMILY MECHANICAL/ELECTRICAL/PLUMBING***

*THIS IS A PERMIT APPLICATION ONLY. WORK IS NOT AUTHORIZED UNTIL FEES HAVE BEEN PAID AND A BUILDING PERMIT HAS BEEN ISSUED.*

<b>ADDRESS</b>				<b>CONSTRUCTION VALUATION</b> \$		<b>DATE</b>	
<b>DESCRIPTION</b>					<b>SQUARE FOOTAGE</b>		
<b>OWNER</b>			<b>APPLICANT/ CONTACT</b>			<b>CONTRACTOR</b>	
<b>ADDRESS</b>			<b>ADDRESS</b>			<b>ADDRESS</b>	
<b>CITY/ STATE/ ZIP</b>			<b>CITY/ STATE/ ZIP</b>			<b>CITY/ STATE/ ZIP</b>	
<b>PHONE</b>		<b>CELL PHONE</b>	<b>PHONE</b>		<b>CELL PHONE</b>	<b>PHONE</b>	
<b>E-MAIL</b>		<b>E-MAIL</b>	<b>E-MAIL</b>		<b>E-MAIL</b>	<b>E-MAIL</b>	
<b>PROJECT TYPE</b>			<b>STRUCTURE TYPE</b>				
<input checked="" type="checkbox"/> NEW			<input checked="" type="checkbox"/> 2 <sup>ND</sup> DWELLING UNIT				
<input type="checkbox"/> ADDITION & REMODEL			<input type="checkbox"/> ACCESSORY STRUCTURE				
<input type="checkbox"/> ADDITION ONLY			<input type="checkbox"/> CONDOMINIUM				
<input type="checkbox"/> REMODEL ONLY			<input type="checkbox"/> SINGLE-FAMILY RESIDENCE				
<b>MECHANICAL</b>			<b>ELECTRICAL</b>			<b>PLUMBING</b>	
NEW HVAC SYSTEM		# SYSTEMS:	SERVICE		# SERVICES:	WATER SERVICE	
REPLACEMENT HVAC		# UNITS:	NEW DWELLING		# DWELLINGS:	NEW DWELLING UNITS	
DUCT EXTENSION ONLY		ROOM AREA: SF	ADDITION & REMODEL		AREA: SF	BATHROOM	
GAS SYSTEM		# OUTLETS:	OUTLETS & FIXTURES		# OUTLETS:	POWDER ROOM	
FURNACE/ HEATER		# UNITS:	BRANCH CIRCUITS		# CIRCUITS:	LAUNDRY	
A/C		# UNITS:	MOTORS/ HEATERS		# MOTORS/HTRS:	KITCHEN	
BOILER		# UNITS:	TRANSFORMERS		# TRANS:	WATER DISTRIBUTION AND REPIPE	
CONDENSER		# UNITS:	PANEL/ PANELBOARDS		# PANELS:	SEWER	
HOOD		# UNITS:	TEMP. POWER			GAS SYSTEM	
AIR INLET/OUTLET/RTRN.		# AIR:	ELECTRICAL EQUIPMENT		# EQUIPMENT:	WATER HEATER AND/OR VENT	
OTHER MECH EQUIP		# EQUIP:	SPECIFY:			<b>PLUMBING FIXTURES:</b>	
SPECIFY:			<input checked="" type="checkbox"/> PHOTOVOLTAIC			WATER CLOSET	
			# ARRAYS:			BATHTUB	
			BUILDING NO. OF STORIES:			SHOWER STALL	
			FLAT ROOF: <input type="checkbox"/> YES <input type="checkbox"/> NO			BAR SINK	
			DISCONNECT: <input type="checkbox"/> YES <input type="checkbox"/> NO			GARBAGE DISPOSAL	
			BATTERY BACKUP: <input type="checkbox"/> YES <input type="checkbox"/> NO			LAWN SPRINKLERS	
<b>PUBLIC WORKS DEPT/SEWER</b>			<b>FIRE DEPARTMENT</b>			DRINKING FOUNTAIN	
INTERCEPTOR REQUIRED: <input type="checkbox"/> YES <input type="checkbox"/> NO			PLAN CHECK: <input type="checkbox"/> YES <input type="checkbox"/> NO			SLOP SINK	
BY: _____ DATE: _____			PLAN CHECK FEE: _____			WATER PRESSURE REGULATOR	
SIGNATURE: _____			NAME: _____			FLOOR DRAIN OR SINK	
BACKFLOW PREVENTION: <input type="checkbox"/> YES <input type="checkbox"/> NO			SIGNATURE: _____			SUMP/ SEWAGE SYSTEM	
BY: _____ DATE: _____			DATE: _____			RAIN WATER DRAIN	
SIGNATURE: _____						OTHER: _____	
<b>BWP/ELECTRIC</b>			<b>BWP/ELECTRIC</b>				
PERFORMANCE METER CONFIRMATION: _____			ELECTRIC VEHICLE CHARGING STATION				
SIGNATURE: <input type="checkbox"/> YES <input type="checkbox"/> NO			SIGNATURE: <input type="checkbox"/> YES <input type="checkbox"/> NO				
<b>I DECLARE THAT THE FOLLOWING STATEMENTS ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF:</b> I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND THAT INFORMATION STATED HEREON IS TRUE. I AGREE TO COMPLY WITH ALL ORDINANCES AND STATE LAWS REGULATING BUILDING CONSTRUCTION. I UNDERSTAND AND AGREE THAT SHOULD I FAIL TO COMPLY WITH THE ABOVE, ALL PERMITS SHALL BE DEEMED REVOKED.							
SIGNED: _____		SIGNATURE OF APPLICANT: _____		SIGNATURE			
DATE							